

century had assigned causal primacy,"^{cdxiii} appears to be largely based on uncritical assessments of Workman's own unself-critical pronouncements about what he thought he was doing. It should be revised or at least reconsidered in the light of how, in Workman's texts, even such causes appear to have been motivated. Most of the diseases discussed above are in complicity with the social arrangements intended to address them, with the doctor, and with language. This tends to refute those historians still addicted to the hagiographic "great man/pioneer" school of medical history, to whom the notion that a medical doctor is not necessarily more rational and objective than anyone else amounts to apostasy.^{cdix} Yet despite the interestedness of Workman's presentation of "diseases" like masturbation, paresis, and moral mania, respectable historians^{cd} still tend to exempt him from the application of arguments like Andrew Scull's in *Museums of Madness*,^{cd} Constance M. McGovern's in *Master's of Madness: Social Origins of the American Psychiatric Profession*,^{cdv} and Ellen Dwyer's in *Homes for the Mad: Life Inside Two Nineteenth-Century Asylums*.^{cdvi}